United States Bankruptcy Court Eastern District of New York, Brooklyn Division

	CT -
	Chapter 7
otor(s)	
RIFICATION OF CREDITO	R MATRIX
or the debtor(s) hereby verify that	at the attached matrix (list of creditors) is true and
/s/ Asma Mahmood Debtor	
Joint Debtor	
/s/ Kevin Zazzera	
	/s/ Asma Mahmood Debtor Joint Debtor

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Bank of America NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012

Bankamerica PO Box 982238 El Paso, TX 79998-2238

Bio Reference Lab Inc 5041 Broadway New York, NY 10034-1131

Bk of Amer PO Box 982238 El Paso, TX 79998-2238

Capital One Attn: Bankruptcy PO Box 30253 Salt Lake City, UT 84130-0253 Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Cbna 50 NW Point Blvd Elk Grove Village, IL 60007-1032

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850-5298

Citi PO Box 6241 Sioux Falls, SD 57117-6241

Citibank North America Citicorp Credit Srvs/Centralized Bankrup PO Box 790040 Saint Louis, MO 63179-0040

Citibank/the Home Depot Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040S Louis, MO 63129 Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt PO Box 790040 Saint Louis, MO 63179-0040

Comenity -The Childrens PLACE PO Box 659820 San Antonio, TX 78265-9120

Comenity Bank/Avenue PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Avenue PO Box 182789 Columbus, OH 43218-2789

Discover Bank c/o Zwicker & Associates 100 Corporate Woods Ste 230 Rochester, NY 14623-1423

Discover Bank 502 E Market St Greenwood, DE 19950-9700

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316 Discover Financial PO Box 3025 New Albany, OH 43054-3025

Dsnb Macys PO Box 8218 Mason, OH 45040-8218

Esoterix Genetic Lab 521 W 57th St New York, NY 10019-2929

Gary Fruhman, MD 475 Seaview Ave Staten Island, NY 10305-3436

Isolda Tsapok, MD 2691 Hylan Blvd Staten Island, NY 10306-4357

James j Ducey, MD 440 Seaview Ave # 2 Staten Island, NY 10305-3401

Kofinas Fertility Services PC 506 6th St Brooklyn, NY 11215-3609

Kohls/Capital One Kohls Credit PO Box 3043 Milwaukee, WI 53201-3043

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Laboratory Corporation of America PO Box 32240 Burlington, NC 27216

Marina Makarovskaya, MD 2076 Hylan Blvd Staten Island, NY 10306-3427

Physicians of University Hosepital 1 Edgewater St Fl 6 Staten Island, NY 10305-4900

Raymour & Flanigan PO Box 130 Liverpool, NY 13088-0130

Semen Avshalumov, MD 475 Seaview Ave Staten Island, NY 10305-3436 Simmons Bank 501 S Main St Pine Bluff, AR 71601-4327

Staten Island University Hospital PO Box 29772 New York, NY 10087-9772

Syncb/jcp PO Box 965007 Orlando, FL 32896-5007

Syncb/lowes
PO Box 965005
Orlando, FL 32896-5005

Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005

Syncb/tjx Cos Dc PO Box 965005 Orlando, FL 32896-5005

Syncb/Walmart PO Box 965024 Orlando, FL 32896-5024 Syncb/Walmart DC PO Box 965024 Orlando, FL 32896-5024

Synchrony Bank/ Jc Penneys Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/ Old Navy Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Lowes
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Synchrony Bank/Tjx Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Walmart Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060 Td Bank N.A.
70 Gray Rd
Portland, ME 04105-2019

Td Bank, N.A.
Attn: Bankruptcy
32 Chestnut St
Lewiston, ME 04240-7744

Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Toyota Motor Credit Co 90 Crystal Run Rd Ste 31 Middletown, NY 10941-7101

Toyota Motor Credit Corp PO Box 8026 Cedar Rapids, IA 52408-8026

Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

B201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

IN RE:	Case No
Mahmood, Asma	Chapter 7
Debtor(s)	
CERTIFICATION OF NOTICE TO	O CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BA	ANKRUPTCY CODE
Certificate of [Non-Attorney] Ban	kruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debtor's penotice, as required by § 342(b) of the Bankruptcy Code.	etition, hereby certify that I delivered to the debtor the attached

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state		
Address.	the Social Security number of the officer, principal, responsible person, or partner of		
X	the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)		
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.	_		

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Mahmood, Asma	X /s/ Asma Mahmood	8/30/2017
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this informa	ation to identify your o	case:		
Debtor 1	Asma Mahmood			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK, BROOKLYN DIVISION	
Office Otales Barn	Kruptcy Court for the.	ENGIERIA DIGITAL	OT OF NEW TORKS, BROOKETTY BIVIOLOGY	
Case number				☐ Check if this is an amended filing
Official For Statemen		on for Indiv	iduals Filing Under Chapt	er 7 12/15
If you are an indivi	idual filipa undar abar	-to: 7 mot fill a	sud this forms if	
	idual filing under char claims secured by yo		out this form ir:	
you have lease You must file this	d personal property a form with the court wi er is earlier, unless the	nd the lease has not ithin 30 days after yo	expired. ou file your bankruptcy petition or by the date set time for cause. You must also send copies to the c	
	ple are filing together the form.	in a joint case, both	are equally responsible for supplying correct info	rmation. Both debtors must sign
	d accurate as possibl ur name and case num		eeded, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List You	ur Creditors Who Have	e Secured Claims		
For any creditor information below		ert 1 of Schedule D: (Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
	litor and the property the	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of			☐ Retain the property and enter into a Reaffirmation	☐ Yes
Description of property			Agreement. ☐ Retain the property and [explain]:	
securing debt:			— retain the property and [explain].	_
Creditor's			Commendate the manager.	□ No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	LI NO
5			☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of property			Agreement. ☐ Retain the property and [explain]:	
securing debt:				_
				_
Creditor's name:			Surrender the property.	□ No
Hame.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
scouning uebt.				

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

Debtor 1 Mahmood, Asma	Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
ne information below. Do not list real estate le	erty Leases at you listed in Schedule G: Executory Contracts and Unexpired L eases. Unexpired leases are leases that are still in effect; the lease lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	eases (Official Form 106G), fill in e period has not yet ended. You
Describe your unexpired personal property le	eases	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Inder penalty of perjury, I declare that I have property that is subject to an unexpired lease.	indicated my intention about any property of my estate that secur	res a debt and any personal
X /s/ Asma Mahmood	X	
Asma Mahmood Signature of Debtor 1	Signature of Debtor 2	
Date August 30, 2017	Date	

Official Form 108

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK, BROOKLYN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Asma First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Mahmood J Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Asma Ahmed	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4063	

Del	otor 1 Mahmood, Asma		Case number (if known)		
		Al and Baldon 4	November 200 and the Live Const		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		89 Virginia Ave Staten Island, NY 10305-1754			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Richmond			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	otor 1 Mahmood, Asma	Case number (if known)					
Par	Tell the Court About	our Bankruptcy (Case				
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Fo 2010)). Also, go to the top of page 1 and check the appropriate box.				
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8.	How you will pay the fee	about how	you may pay. Typical ney is submitting you	lly, if you are paying the fee yours	with the clerk's office in your local court for reself, you may pay with cash, cashier's check, attorney may pay with a credit card or check	or money order.	
			ay the fee in instal		n, sign and attach the Application for Individu	als to Pay The	
		☐ I request the not required your family	hat my fee be waived to, waive your fee, a size and you are una	ed (You may request this option and may do so only if your incom	only if you are filing for Chapter 7. By law, a je is less than 150% of the official poverty line.). If you choose this option, you must fill out and file it with your petition.	e that applies to	
9.	Have you filed for bankruptcy within the last 8 years?	■ No. □ Yes. Distriction		WhenWhen	Case number Case number		
		Distric	ct	When	Case number		
10.	Are any bankruptcy cases pending or being filed by	■ No					
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debto	r		Relationship to you		
		Distric	ct	When	Case number, if known		
		Debto	r		Relationship to you		
		Distric	ct	When	Case number, if known		
11.	Do you rent your residence?	■ No. Go to	o line 12.				
		☐ Yes. Has	your landlord obtaine	ed an eviction judgment against y	ou and do you want to stay in your residence	?	
			No. Go to line 12	2.			
			Yes. Fill out <i>Initia</i> bankruptcy petition		udgment Against You (Form 101A) and file i	: with this	

Deb	tor 1 Mahmood, Asma				Case number (if known)
	_				
Part	Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	r
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Stat	e & ZIP Code
	to this petition.		Check	the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriations. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure C. 1116(1)(B).		
	For a definition of small	■ No.	I am r	ot filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	No. I am filing under Chapter 11, but I am NC Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	he hazard?	
	safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code

Debtor 1 Mahmood, Asma Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Mahmood, Asma			Case numb	DET (if known)		
Par	t 6: Answer These Questi	ons for Repo	orting Purposes				
16.	What kind of debts do you have?			nsumer debts? Consumer debts are def	ined in 11 U.S.C.§ 101(8) as "incurred by an		
		[No. Go to line 16b.				
			Yes. Go to line 17.				
				siness debts? Business debts are debts through the operation of the business or			
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. S	tate the type of debts you owe	e that are not consumer debts or business	s debts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be		No				
	available for distribution to unsecured creditors?	[] Yes				
18.	How many Creditors do	■ 1-49		1 ,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		5 001-10,000	5 0,001-100,000		
		□ 100-199 □ 200-999		☐ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$ 0 - \$50	.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,001	- \$100,000	☐ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			1 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		\$500,00	1 - \$1 million	— \$100,000,001	- Word than \$60 billion		
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				I am aware that I may proceed, if eligible able under each chapter, and I choose to p	e, under Chapter 7, 11,12, or 13 of title 11, Unite proceed under Chapter 7.		
			y represents me and I did not ed and read the notice required		an attorney to help me fill out this document, I		
		I request re	lief in accordance with the ch	apter of title 11, United States Code, spe	ecified in this petition.		
case o			understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy ase can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		Asma Ma Signature of	hmood	Signature of Debi	tor 2		
		Executed or		Executed on			
			MM / DD / YYYY		M / DD / YYYY		

Debtor 1 Mahmood, Asma		Cas	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United State	es Code, and have explained t	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in
If you are not represented by an attorney, you do not need to file this page.			ry that the information in the schedules filed with the
	/s/ Kevin Zazzera	Date	August 30, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Kevin Zazzera		
	Printed name		
	Kevin B. Zazzera, Esq.		
	Firm name		
	182 Rose Ave Ste 3		
	Staten Island, NY 10306-2900		
	Number, Street, City, State & ZIP Code		
	Contact phone	Email address	kzazz007@yahoo.com
	December 6 Olete		
	Bar number & State		

Fill in this inform	ation to identify your	case and this filing:			
Debtor 1	Asma Mahmood	case and this ming.			
Debior	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
	kruptcy Court for the:		NEW YORK, BROOKLYN DIVIS	SION	
Officed States Barri	kruptcy Court for the.	EASTERN DISTRICT OF	NEW TORK, BROOKETN DIVIS	501	
Case number					☐ Check if this is an amended filing
L					amended ming
Official For	m 1061/P				
Official For					
	A/B: Prop				12/15
think it fits best. Be	as complete and accura space is needed, attach	te as possible. If two married	ce. If an asset fits in more than or people are filing together, both ar . On the top of any additional page	e equally responsible fo	or supplying correct
Part 1: Describe E	ach Residence, Building	յ, Land, or Other Real Estate ՝	You Own or Have an Interest In		
1. Do vou own or ha	ve anv legal or equitable	e interest in any residence, bu	uilding, land, or similar property?		
_		,,			
No. Go to Part 2					
☐ Yes. Where is	tne property?				
Part 2: Describe Y	our Vehicles				
			cles, whether they are registered: Executory Contracts and Une.		vehicles you own that
3. Cars, vans, truc	cks, tractors, sport ut	ility vehicles, motorcycles	;		
□No					
□ No ■ Yes					
■ res					
3.1 Make: T	oyota	Who has an intere	est in the property? Check one		red claims or exemptions. Put
Model: C	amry	■ Debtor 1 only			secured claims on Schedule D: e Claims Secured by Property.
	012	Debtor 2 only		Current value of th	
Approximate Other informa		Debtor 1 and De	ebtor 2 only he debtors and another	entire property?	portion you own?
Outer informa	auon.	At least one of t	ne debtors and another		
		Check if this is (see instructions)	community property	\$5,379.	00 \$5,379.00
		(See Instructions)			
4 Metananaft sina		F\/	luchialas athanushialas and		
			I vehicles, other vehicles, and s, snowmobiles, motorcycle acce		
■ N.					
■ No □ Yes					
□ Yes					
				_	
			ries from Part 2, including any		\$5 270 00
you have attac	ched for Part 2. Write	that number here		=>	\$5,379.00
Part 3: Describe Y	our Personal and Hous	ehold Items			
		able interest in any of the	following items?		Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
Household goo Examples: Majo	ds and furnishings or appliances, furniture,	linens, china, kitchenware			

Debtor 1	Mahmood, A	Asma Case number (if known)	
■ Ye	s. Describe		
		furniture	\$800.00
Electr Exam	nples: Televisions ar including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collec phones, cameras, media players, games	tions; electronic devices
	s. Describe		
	collections, n	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or be nemorabilia, collectibles	paseball card collections; other
	s. Describe		
	instruments	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and k	ayaks; carpentry tools; musical
	s. Describe		
I0. Firea Exai ■ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment	
	s. Describe		
1. Cloth <i>Exai</i> □ No	<i>mpl</i> es: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories	
■ Ye	s. Describe	clothes	\$300.00
		Ciotties	
■ No	<i>mples:</i> Everyday jev	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, s	silver
Exa	farm animals mples: Dogs, cats,	pirds, horses	
■ No	s. Describe		
■ No)	d household items you did not already list, including any health aids you did not list	
☐ Ye	s. Give specific info	ormation	
		of all of your entries from Part 3, including any entries for pages you have attached for nber here	\$1,100.00
Part 4:	Describe Your Finan	cial Assets	
Do you	own or have any l	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Cash <i>Exai</i> □ No	<i>mpl</i> es: Money you h	ave in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
■ Ye	S	cash	\$50.00
		cash	300.00

D	ebtor 1	Mahmod	od, Asma			Case number (if known)	
17.	Examp _		g, savings, or		certificates of deposit; shares in creatithe same institution, list each.	dit unions, brokerage houses, and of	ther similar
	□ No ■ Yes				Institution name:		
			17.1.	Checking Account	RCSB checkinhg		\$1,000.00
			17.2.	Checking Account	TD checking		\$300.00
18.	Examp ■ No	les: Bond fu		Ç	e firms, money market accounts		
	☐ Yes			Institution or issuer name	3 :		
19.	Non-pu joint ve No	•	d stock and i	interests in incorporated	I and unincorporated businesses	s, including an interest in an LLC,	partnership, and
	_	Give specifi		about them me of entity:		% of ownership:	
20	Negotia Non-ne ■ No	able instrume egotiable insi	ents include p truments are t information a	ersonal checks, cashiers' hose you cannot transfer t	e and non-negotiable instruments checks, promissory notes, and mon- o someone by signing or delivering t	ey orders.	
21.			sion account	s	, thrift savings accounts, or other p	pension or profit-sharing plans	
	■ No				, timit savings associate, or strong	onsion of profit sharing plans	
	☐ Yes. l	List each acc	count separate Type	ely. of account:	Institution name:		
22.	Your sh	hare of all un		you have made so that yo	ou may continue service or use from utilities (electric, gas, water), telecor		
	_				Institution name or individual:		
				rity Deposit on al Unit	landlord		\$1,350.00
23.	. Annuiti de No □ Yes	`	·	lic payment of money to you	u, either for life or for a number of ye	ears)	
24.	. Interests	s in an educ	,	an account in a qualifie and 529(b)(1).	d ABLE program, or under a qua	lified state tuition program.	
	■ No □ Yes	, ,	. , ,	, , , ,	arately file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	. Trusts,	equitable o	r future inter	ests in property (other t	han anything listed in line 1), and	d rights or powers exercisable for	your benefit
	■ No □ Yes.	Give specifi	c information	about them			
26.				s, trade secrets, and oth s, websites, proceeds from	er intellectual property n royalties and licensing agreements	S	

 \square Yes. Give specific information about them...

D	ebtor 1	Mahmood	, Asma		Case number (if known)	
27	Exam ■ No	nples: Building p	, and other general intangermits, exclusive licenses, of		ngs, liquor licenses, professional licenses	
M	oney or	r property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	efunds owed to		iding whether you already file	d the returns and the tax years	
29	Exam	y support nples: Past due o	, , , , ,	sal support, child support, m	naintenance, divorce settlement, property	settlement
30	Exam		ages, disability insurance pa ans you made to someone		ck pay, vacation pay, workers' compensat	ion, Social Security benefits;
31	Exam				credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
32	If you died. No				e policy, or are currently entitled to receive p	property because someone has
33	Exam ■ No		, employment disputes, ins	ou have filed a lawsuit or n urance claims, or rights to si	nade a demand for payment ue	
34	■ No	contingent and	-	very nature, including cou	interclaims of the debtor and rights to s	et off claims
35	■ No	nancial assets . Give specific i	you did not already list			
30			-		tries for pages you have attached for	\$2,700.00
P	art 5: D	escribe Any Bus	iness-Related Property You	Own or Have an Interest In. Li	st any real estate in Part 1.	
	No. G	own or have any so to Part 6. Go to line 38.	/ legal or equitable interest i	n any business-related proper	ty?	

Deb	tor 1	Mahmood, Asma		Case number (if known)	
Part		cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	t In.	
		own or have any legal or equitable interest in any farn	n- or commercial fishing	-related property?	
	_	Go to Part 7.			
		Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
		have other property of any kind you did not already li	st?		
	Examp. I No	les: Season tickets, country club membership			
		Give specific information			
				ſ	
54.	Add th	ne dollar value of all of your entries from Part 7. Write	that number here		\$0.00
				l	
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$5,379.00		
57.	Part 3	: Total personal and household items, line 15	\$1,100.00		
58.	Part 4	: Total financial assets, line 36	\$2,700.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$9,179.00	Copy personal property tot	al \$9,179.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$9,179.00

					_						
Fil	ll in this inform	ation to identify your ca	ise:								
De	ebtor 1	Asma Mahmood									
De	ebtor 2	First Name	Middle Name	Last Name							
	oouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NE	EW YORK, BROOKLYN DIVISION							
Ca	ase number										
	known)				☐ Check if this is an						
					amended filing						
<u>)</u>	fficial For	m 106C									
S	chedule	e C: The Pro	perty You Cla	im as Exempt	4/16						
oro out	perty you listed o	on Schedule A/B: Propert	y (Official Form 106A/B) as yo	gether, both are equally responsible for source, list the property that you claim cessary. On the top of any additional pag	as exempt. If more space is needed, fill						
spe app un	ecific dollar am plicable statuto ids—may be ur	ount as exempt. Alterna ry limit. Some exemptio nlimited in dollar amoun lar amount and the valu	tively, you may claim the functions—such as those for healt t. However, if you claim an e	amount of the exemption you claim. (Ill fair market value of the property be th aids, rights to receive certain benef exemption of 100% of fair market value ned to exceed that amount, your exen	ing exempted up to the amount of any its, and tax-exempt retirement e under a law that limits the exemption						
Pε	art 1: Identify	the Property You Clair	n as Exempt								
1.	Which set of	exemptions are you clai	ming? Check one only, even	if your spouse is filing with you.							
	☐ You are clai	ming state and federal no	nbankruptcy exemptions. 11	U.S.C. § 522(b)(3)							
	You are clai	ming federal exemptions	11 I I S C. 8 522(b)(2)								
2		■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
۷.		on of the property and line	-	Amount of the exemption you claim	Specific laws that allow exemption						
		hat lists this property	portion you own	Amount of the exemption you diami	opcomo lawa tilat allow exemption						
			Copy the value from Schedule A/B	Check only one box for each exemption.							
	Toyota		\$5,379.00		11 USC § 522(d)(2)						
	Camry 2012			■ 100% of fair market value, up to	•						
	100000			any applicable statutory limit							
	Line from Sche	edule A/B: 3.1									
	furniture		\$800.00		11 USC § 522(d)(3)						
	Line from Sche	edule A/B: 6.1		■ 100% of fair market value, up to							
				any applicable statutory limit							
	clothes		\$300.00		11 USC § 522(d)(3)						
	Line from Sche	edule A/B: 11.1		■ 100% of fair market value, up to							
				any applicable statutory limit							
	cash		\$50.00		11 USC § 522(d)(5)						
	Line from Sche	edule A/B: 16.1		100% of fair market value, up to any applicable statutory limit							
	RCSB chec	kinhg	\$1,000.00		11 USC § 522(d)(5)						
		edule A/B: 17.1		■ 100% of fair market value, up to							
				10070 01 1aii 11iaii(01 vaido, up to							

Official Form 106C

any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	TD checking Line from Schedule A/B 17.2	\$300.00	□ 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
	landlord Line from Schedule A/B: 22.1	\$1,350.00	□	11 USC § 522(d)(5)
3.	Are you claiming a homestead exemptic (Subject to adjustment on 4/01/19 and ever No Yes. Did you acquire the property cov No Yes	ry 3 years after that for case		

First Name Middle Name Last Name L						_	
Debtor 2 Severe List Name Last Name	Fill in this informa	tion to identify you	r case:				
Deboto 2 General Home Caster Name Caster No DISTRICT OF NEW YORK, BROOKLYN DIVISION Case number Check if this is an amended filing Check if this	Debtor 1	Asma Mahmoo	d				
United States Bankruptory Court for the: EASTERN DISTRICT OF NEW YORK, BROOKLYN DIVISION		First Name	Middle Name Last N	lame		}	
United States Bankruptory Court for the: EASTERN DISTRICT OF NEW YORK, BROOKLYN DIVISION Case number Check if this is an amended filing	Debtor 2	First Name	Middle Neme Leet N	lomo			
Case number Check if this is an amended filing	(Spouse II, IIIIIIg)	First Name	wilddie Name Last N	iame			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is secured copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if column I more than one torditor has a paticular claim, list the orditions specially the copy the Additional Pages, write the drains in adjustable color according to the creditor is name. 2 List all secured claims. If a creditor has a paticular claim, list the other creditors specially and the color color the value of collateral that supports this claim. 2 Toyota Motor Credit Copy Condition (if the page of color color the value of collateral that supports this claim.) 2 Toyota Motor Credit Copy Condition (if the Color the pages of color co	United States Bank	ruptcy Court for the:	EASTERN DISTRICT OF NEW YORK	, BROOK	LYN DIVISION		
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is secured copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Page, till it out, number the entries, and stach it to this form. On the top of any additional pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if copy the Additional Pages, write your name and case number (if column I more than one torditor has a paticular claim, list the orditions specially the copy the Additional Pages, write the drains in adjustable color according to the creditor is name. 2 List all secured claims. If a creditor has a paticular claim, list the other creditors specially and the color color the value of collateral that supports this claim. 2 Toyota Motor Credit Copy Condition (if the page of color color the value of collateral that supports this claim.) 2 Toyota Motor Credit Copy Condition (if the Color the pages of color co	Case number						
Difficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is seeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if norm). Do any reditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Wes. Fill in all of the information below. PORTSI: List All Secured Claims List All Secured Claims Toyota Motor Credit Corp Corp Describe the claims in alphabetical order according to the creditor is name. PO Box 8026 Cedar Rapids, IA 52408-8026 Number. Sheme. Cky. Sheme A: Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. At a greenment you made (such as mortgage or secured carries) Add the dollar value of your entries in Column A on this page. Write that number here: \$8,643.00 Statutory lier (such as tax lier, mechanic's lier) Debtor 2 only Check if this claim relates to a community debt Add the dollar value of your ontries in Column A on this page. Write that number here: \$8,643.00 Statutory lier (such as tax lier, mechanic's lier) Other (including a right to offset) Column A on this page. Write that number here: \$8,643.00 Statutory lier (such as tax lier, mechanic's lier) Add the dollar value of your ontries in Column A on this page. Write that number here: \$8,643.00 Statutory lier (such as tax lier, mechanic's lier) Other (including a right to offset) Community debt Add the dollar value of your ontries in Column A on this page. Write that number here: \$8,643.00 Statutory lier of the debtor on your form, add the dollar value totals from all pages.	(if known)					☐ Checl	cif this is an
Schedule D: Creditors Who Have Claims Secured by Property 12/15 Seas complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is seeded closy; the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if norwin). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. The Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 11 Yes. Fill in all of the information below. 12 Yes. Fill in all of the information below. 12 Yes. Fill in all of the information below. 13 Yes. Fill in all of the information below. 14 Yes. Fill in all of the information below. 15 Yes. Fill in all of the information below. 16 Yes. Fill in all of the information below. 17 Yes Fill in all of the information below. 18 Yes. Fill in all of the information below. 19 Yes. Fill in all of the information below. 19 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below						amen	ded filing
Schedule D: Creditors Who Have Claims Secured by Property 12/15 Seas complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is seeded closy; the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if norwin). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. The Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 11 Yes. Fill in all of the information below. 12 Yes. Fill in all of the information below. 12 Yes. Fill in all of the information below. 13 Yes. Fill in all of the information below. 14 Yes. Fill in all of the information below. 15 Yes. Fill in all of the information below. 16 Yes. Fill in all of the information below. 17 Yes Fill in all of the information below. 18 Yes. Fill in all of the information below. 19 Yes. Fill in all of the information below. 19 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below. 10 Yes. Fill in all of the information below	Official Form	106D					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is seeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if norwn). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Page 11: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor is near. 2. List all secured claims is a phabetical order according to the creditor is name. 2.1 Toyota Motor Credit Corp Creditor's Name PO Box 8026 Cedar Rapids, IA, 52408-8026 Nember, State, Clay, State & Zip Code Nember, Steet, Clay, State & Zip Code Unliquidated Who owes the debt? Check one. At least one of the debtors and another claim. Statutory lien (such as tax lien, mechanic's lien) Add the dollar value of your entries in Column A on this page. Write that number here: Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Date debt was incurred 2014-05 Last 4 digits of account number 0001 Add the dollar value of your entries in Column A on this page. Write that number here: \$8,643.00 Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Statutory lien (such as tax lien right) Statuto			Who House Claims Coo	urad	by Droport		10/15
Dear yerdelitors have claims secured by your property?	Schedule L): Creditors	who have claims sec	urea	by Property	У	12/15
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. Column A Column B Amount of claim that supports this particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a possible, list the claims in alphabetical order according to the creditor's name. PO to a Motor Credit Corp Corellor's Name PO Box 8026 Cedar Rapids, IA 52408-8026 Number, Street, City, State & Zip Code Who owes the debt? Check one. As of the date you file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim relates to a community debt Date debt was incurred Other (including a right to offset) Community debt Date debt was incurred Other (including a right to offset) Last 4 digits of account number Write that number here: Extra 2: List Others to Be Notified for a Debt That You Already Listed Name, Number, Street, City, State & Zip Code Name or in a collection agency is trying to collect from you for a debt yea ove to assessment of the right of th							
Post Sili in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditor sin Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Toyota Motor Credit Corp Corditor's Name PO Box 8026 Cedar Rapids, IA 52408-8026 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured cardion) At this is the last page of your form, add the dollar value to false from all pages. Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified shout your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you went to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Toyotal Motor Credit Co 90 Crystal Run RdS 8ta 31 Column A Amount of claim Dond Collection separately Value of collateral that supports this collection separately Uses the page only on the page of your form, and the dollar value totals from all pages. Name, Number, Street, City, State & Zip Code Toyotal Motor Credit Co	1. Do any creditors ha	ave claims secured by	your property?				
2. List all secured claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim for each claim. If more than one creditor has a particular claim, list the other creditor in Part 2. As mount of claim for each claim. If more than one creditor has a particular claim, list the other creditor in Part 2. As mount of claim for each claim. If you deduct the value of collateral. 2.1 Toyota Motor Credit Corp Describe the property that secures the claim: S8,643.00 \$5,379.00 \$3,264.00 \$3,264.00 Creditor Name Describe the property that secures the claim: Corp Describe the property that secures the claim: Describe the property that secures the claim: Describe the property that secures the claim: S8,643.00 \$5,379.00 \$3,264.00 \$3,264.00 Column A Amount of claim bo not deduct the value of collateral. The value of collateral that supports this claim supports this claim supports this claim. The value of collateral that supports this claim supports this claim. The value of collateral that supports this claim supports this supports this claim. The value of collateral that supports this claim supports this claim. The value of collateral that supports this claim supports this claim. The value of collateral that supports this claim. The value of collateral	□ No. Check the property of the property o	nis box and submit th	is form to the court with your other schedule	s. You ha	ve nothing else to re	port on this form.	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If an application of calam, list the other creditor in Part 2. As a Manunt of claim than a particular claim, list the other creditor in Part 2. As a Manunt of claim than a plantabelical order according to the creditor 's name. 2.1 Toyota Motor Credit Corp Describe the property that secures the claim: Sa,643.00 \$5,379.00 \$3,264.00 Source of Codar Rapids, IA Set 10 Se	Yes. Fill in al	Il of the information b	elow.				
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If an application of calam, list the other creditor in Part 2. As a Manunt of claim than a particular claim, list the other creditor in Part 2. As a Manunt of claim than a plantabelical order according to the creditor 's name. 2.1 Toyota Motor Credit Corp Describe the property that secures the claim: Sa,643.00 \$5,379.00 \$3,264.00 Source of Codar Rapids, IA Set 10 Se	Part 1: List All 9	Secured Claims					
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Creditor's Name PO Box 8026 Cedar Rapids, IA 52408-8026 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim relates to a community debt Date debt was incurred Disputed Add the dollar value of your entries in Column A on this page. Write that number here: \$8,643.00 \$5,379.00 \$3,264.00 \$3,264.00 \$3,264.00 \$4,325.00 \$4,325.00 \$5,379.00 \$3,264.00 \$4,325.00 \$5,379.00 \$3,264.00 \$5,379.00 \$3,264.00 \$5,379.00 \$3,264.00 \$4,000	for each claim. If more	e than one creditor has	a particular claim, list the other creditors in Part		Do not deduct the	that supports this	portion
Creditor's Name 2012 Toyota Camry	2.1 1 -	or Credit	Describe the manufacture of a second the second		\$8 6/3 00	\$5 370 0 0	\$3.264.00
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Who owes the debt? Check one. Disjouted Nature of lien. Check all that apply.	52408-8026	i	☐ Contingent				
Who owes the debt? Check one. Debtor 1 only	Number, Street, C	city, State & Zip Code	<u> </u>				
Debtor 1 only	Who awas the debt	2 Chook one	•				
Debtor 2 only		? Check one.	_		1		
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If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,643.00	Add the dollar value	of your entries in Col	umn A on this page. Write that number here:		\$8,643	.00	
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Name, Number, Street, City, State & Zip Code Toyota Motor Credit Co 90 Crystal Run Rd Ste 31 On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number 0001	trying to collect from than one creditor for	you for a debt you o any of the debts that	we to someone else, list the creditor in Part 1 you listed in Part 1, list the additional credito	, and then	list the collection ag	ency here. Similarly, if y	ou have more
Toyota Motor Credit Co 90 Crystal Run Rd Ste 31 Last 4 digits of account number 0001		or an out of submit til	o pago.				
Toyota Motor Credit Co 90 Crystal Run Rd Ste 31 Last 4 digits of account number	Name, Numbe	r, Street, City, State & 2	Zip Code	On which I	line in Part 1 did vou er	nter the creditor? 2.1	
· · · · · · · · · · · · · · · · · · ·					·		
	•		1	Last 4 digi	ts of account number _	0001	

Official Form 106D

Fill in	n this inforn	nation to identify your o	case:					
Debte	or 1	Asma Mahmood						
		First Name	Middle N	lame	Last Name		- }	
Debt		First Name	NAC-L-III - N	1	Last Name		_	
(Spous	se if, filing)	First Name	Middle N	iame	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	EASTERN	DISTRICT OF NEW	YORK, BRO	OKLYN DIVISION	_ [
Cooo								
(if know	number _ wn)			_				Check if this is an
							_	amended filing
								Ü
Office 1	cial Forn	n 106E/F						
Sch	edule E	:/F: Creditors W	/ho Have	Unsecured	Claims			12/15
Part Part Part D Part C Part C	ntinuation Panumber (if knot All List All Do any creditor No. Go to Panumber Yes. 2: List All Do any creditor Con All Con Any Creditor Con All Con Any Creditor Con Control Con Control Con Control Control Con Control Contro	II of Your PRIORITY Un	ve no informati secured Clair d claims agains Y Unsecured	on to report in a Part ms st you? Claims gainst you?	, do not file th	at Part. On the top of a		
4. L	ist all of your nsecured clair nan one credit	r nonpriority unsecured cla m, list the creditor separately or holds a particular claim, li	for each claim.	For each claim listed,	identify what t	ype of claim it is. Do not I	list claims already inc	luded in Part 1. If more Continuation Page of Part
								Total claim
4.1	Amex			Last 4 digits of acco	ount number	2173		\$5,543.00
		y Creditor's Name pondence		When was the debt	incurred?	2016-07		
		(981540		Wilder Was the dost	ourrour	2010-01		_
		o, TX 79998-1540						
		treet City State ZIp Code		As of the date you f	ile, the claim	is: Check all that apply		
	_	rred the debt? Check one.						
	Debtor	1 only		☐ Contingent				
	☐ Debtor	2 only		☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only		☐ Disputed				
	☐ At leas	st one of the debtors and and	other	Type of NONPRIOR	ITY unsecured	d claim:		
	☐ Check	if this claim is for a com	nunity	☐ Student loans				
	debt	im subject to offset?		Obligations arising report as priority clair		ration agreement or divo	rce that you did not	
	_	iii subject to onset?				g plans, and other simila	r dobto	
	■ No			•	•	•		
	☐ Yes					account		_
				,	- HUNDIVIDA	account		

Debto	Mahmood, Asma		Case number (f know)	
4.2	Amex	Last 4 digits of account number	5823	\$1,363.00
	Nonpriority Creditor's Name Correspondence PO Box 981540 El Paso, TX 79998-1540	When was the debt incurred?	2014-12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing	ration agreement or divorce that you did not g plans, and other similar debts	
	Yes	■ Other. Specify Revolving	account	
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	9735	\$5,423.00
	NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012	When was the debt incurred?	2012-06	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	I claim:	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Revolving	account	
4.4	Bio Reference Lab Inc Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$13.52
	5041 Broadway New York, NY 10034-1131	When was the debt incurred?		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	I claim: ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify medical bil		

Debto	Mahmood, Asma		Case number (if know)	
4.5	Bk of Amer Nonpriority Creditor's Name	Last 4 digits of account number	2113	\$1,614.00
		When was the debt incurred?	2012-06	
	PO Box 982238			
	EI Paso, TX 79998-2238 Number Street City State Zlp Code	_ As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans	a stann.	
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify		
		Revolving	account	
4.6	Canital One	Last 4 digits of account number	2861	\$22.002.00
4.0	Capital One Nonpriority Creditor's Name	_ Last 4 digits of account number		\$22,983.00
	Attn: Bankruptcy	When was the debt incurred?	2016-04	
	PO Box 30253			
	Salt Lake City, UT 84130-0253 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Revolving	account	
_				
4.7	Chase Card	Last 4 digits of account number	8397	\$10,256.00
	Nonpriority Creditor's Name Attn: Correspondence Dept	When was the debt incurred?	2014-11	
	PO Box 15298		2017 11	
	Wilmington, DE 19850-5298	_		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plane, and other similar debte	
	■ No	_	וא אומוים, מווע טנוופו סוווווומו עפטנס	
	Yes	Other. Specify		
		Revolving	account	

Debtor 1 Mahmood, Asma		Case number (if know)		
4.8	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	2038	\$4,715.00
	Attn: Correspondence Dept PO Box 15298	When was the debt incurred?	2011-02	
	Wilmington, DE 19850-5298	_		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ig plans, and other similar debts	
	Yes	Other. Specify		
		Revolving	account	
4.9	Citibank North America Nonpriority Creditor's Name	Last 4 digits of account number	3652	\$3,681.00
	Citicorp Credit Srvs/Centralized	When was the debt incurred?	2016-05	
	Bankrup PO Box 790040			
	Saint Louis, MO 63179-0040			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Revolving account		
4.10	Citibank/the Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	3610	\$5,857.00
	Citicorp Cr Srvs/Centralized	When was the debt incurred?	2014-05	
	Bankruptcy			
	PO Box 790040S Louis, MO 63129			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Revolving	account	

Debtor 1 Mahmood, Asma		Case number (f know)		
4.11	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	2945	\$12,426.00
-	Citicorp Credit Svc/Centralized Bankrupt PO Box 790040	When was the debt incurred?	2009-05	
	Saint Louis, MO 63179-0040 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, i.e. o. i.i.e aaie , eae, i.i.e eia	er chook an mat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 		
	■ No			
	Yes	Other. Specify Revolving	Other. Specify Revolving account	
4.12	Citicards Cbna	Last 4 digits of account number	4980	\$4,376.00
	Nonpriority Creditor's Name Citicorp Credit Svc/Centralized	When was the debt incurred?	2016-07	
	Bankrupt	when was the dept incurred?	2010-07	
	PO Box 790040			
	Saint Louis, MO 63179-0040			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
		Revolving account		
442	Companity The Children DI ACE			£200.00
4.13	Comenity -The Childrens PLACE Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?		\$380.00
	PO Box 659820	When was the dest mounted.		
	San Antonio, TX 78265-9120			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other, Specify	5. -, 	
	 1 €3	Otner, Specify		

Debtor 1 Mahmood, Asma		Case number (f know)		
4.14	Comenity Bank/Avenue	Last 4 digits of account number	1817	\$984.00
	Nonpriority Creditor's Name	When was the debt incurred?	2015-11	
	PO Box 182125			
	Columbus, OH 43218-2125	= A. (61 - 1.4		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	<u>_</u>			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts	
	_	_	g plans, and other similar debts	
	☐ Yes	Other. Specify		
$\overline{}$		Kevolvilig	account	
4.15	Discover Bank Nonpriority Creditor's Name	Last 4 digits of account number	1920	\$10,880.00
	c/o Zwicker & Associates	When was the debt incurred?	2013-03	
	100 Corporate Woods Ste 230			
	Rochester, NY 14623-1423			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	Пол		
		☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify lawsuit - 003352/2017		
		— Cirici: Opcony		
4.16	Discover Financial	Last 4 digits of account number	8058	\$9,972.00
	Nonpriority Creditor's Name	When was the debt incurred?	1999-04	
	PO Box 3025		1333 04	
	New Albany, OH 43054-3025	_		
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	Yes	Other. Specify		
		Revolving	account	

Debtor 1 Mahmood, Asma		Case number (f know)			
4.17	Esoterix Genetic Lab Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$47.89	
	Nonphonty Greator's Name	When was the debt incurred?			
	521 W 57th St				
	New York, NY 10019-2929 Number Street City State Zlp Code	As of the date you file, the claim i	a. Chack all that apply		
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тат арру		
	Debtor 1 only	Пол			
	_	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	·	☐ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans	d Claim.		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify medical bil	<u> </u>		
4.18	Gary Fruhman, MD	Last 4 digits of account number	xxxx	\$360.30	
	Nonpriority Creditor's Name			,	
	475 October A	When was the debt incurred?			
	475 Seaview Ave Staten Island, NY 10305-3436				
	Number Street City State Zlp Code	 As of the date you file, the claim i 	s: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims	agreement or arrered that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify medical bill			
4.19	Isolda Tsapok, MD	Last 4 digits of account number	XXXX	\$892.00	
	Nonpriority Creditor's Name	When was the debt incurred?			
	2691 Hylan Blvd	when was the dept incurred?			
	Staten Island, NY 10306-4357				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify medical bil	I		

Debto	r 1 Mahmood, Asma	Case number (f know)	
4.20	James j Ducey, MD Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$115.32
	Nonphonty Creditor's Name	When was the debt incurred?	
	440 Seaview Ave # 2 Staten Island, NY 10305-3401		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical bill	
4.21	Kofinas Fertility Services PC	Last 4 digits of account number 4653	\$51.45
	Nonpriority Creditor's Name	When was the debt incurred?	_
	506 6th St	when was the debt incurred?	
	Brooklyn, NY 11215-3609		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.22	Vahla/Canital One	Last 4 digits of account number 5193	f2 424 00
4.22	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number 5193	\$2,431.00
	Kohls Credit PO Box 3043	When was the debt incurred? 2008-05	
	Milwaukee, WI 53201-3043	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Revolving account	

Debto	Mahmood, Asma	Case number (if know)	
4.23	Laboratory Corporation of America Nonpriority Creditor's Name	Last 4 digits of account number 4545	\$47.89
	Transference of talling	When was the debt incurred?	
	PO Box 32240 Burlington, NC 27216 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.24	Marina Makarovskaya, MD Nonpriority Creditor's Name	Last 4 digits of account number XXX	\$20.00
	Nonphoney Oreattor's Name	When was the debt incurred?	
	2076 Hylan Blvd Staten Island, NY 10306-3427		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	s for a community	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bill	
4.25	Physicians of University Hosepital Nonpriority Creditor's Name	Last 4 digits of account number 1921	\$1,400.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	1 Edgewater St FI 6 Staten Island, NY 10305-4900		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify multi-medical bills	
	— 163	Other, Specify India inedical bills	

Debto	Mahmood, Asma	Case number (f know)	
4.26	Raymour & Flanigan Nonpriority Creditor's Name	Last 4 digits of account number 5995	\$4,312.71
	PO Box 130	When was the debt incurred?	
	Liverpool, NY 13088-0130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.27	Semen Avshalumov, MD	Last 4 digits of account number XXXX	\$7.50
	Nonpriority Creditor's Name	When was the debt incurred?	
	475 Seaview Ave Staten Island, NY 10305-3436		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bill	
4.28	Simmons Bank Nonpriority Creditor's Name	Last 4 digits of account number 8567	\$4,270.00
	Nonpholity Orealton's Name	When was the debt incurred? 2016-01	
	Fine Bluff, AR 71601-4327 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Revolving account	

Debtor	1 Mahmood, Asma		Case number (f know)				
4.29	Staten Island University Hospital Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$3,175.00			
	rionphony oroane. O riame	When was the debt incurred?					
	PO Box 29772 New York, NY 10087-9772 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Multi -med	■ Other. Specify Multi -medical bills				
4.30	Synchrony Bank/ Jc Penneys Nonpriority Creditor's Name	Last 4 digits of account number	7230	\$4,781.00			
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2013-11				
	Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim i						
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	_						
	_	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	_	ration agreement or diverse that you did not				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	ring plans, and other similar debts				
	Yes	Other. Specify					
		Revolving	account				
4.31	Synchrony Bank/ Old Navy	Last 4 digits of account number	2854	\$324.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	2016-10				
	PO Box 956060 Orlando, FL 32896-5060	When was the dest medired.	2010-10				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	☐ Other. Specify					

Revolving account

Debto	Mahmood, Asma							
4.32	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	5697	\$1,740.00				
	Attn: Bankruptcy PO Box 965060	When was the debt incurred?	2016-07					
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.	, 10 o. 1110 date you, 1110 o.111111	or choose an unat apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify						
		Revolving	account					
4.33	Synchrony Bank/Tjx Nonpriority Creditor's Name	Last 4 digits of account number	7962	\$2,060.00				
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2016-07					
	Orlando, FL 32896-5060	_						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify						
		Revolving	account					
4.34	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	3488	\$6,467.00				
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2014-12					
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent	Contingent					
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing						
	☐ Yes	Other. Specify						
	Revolving account							

Debtor	1 Mahmood, Asma		Case number (f know)				
4.35	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	4852	\$1,523.00			
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2014-11				
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim	ic. Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	ь. Спеск ан шасарру				
	Debtor 1 only	По :: .					
	_	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans	u Claini.				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify					
		Revolving	account				
4.36	Td Bank, N.A. Nonpriority Creditor's Name	Last 4 digits of account number	0927	\$4,800.00			
	Attn: Bankruptcy	When was the debt incurred?	2013-03				
	32 Chestnut St Lewiston, ME 04240-7744						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other Specify Revolving	account				
	Visa Dept Store National						
4.37	Bank/Macy's	Last 4 digits of account number	8854	\$1,027.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	2013-11				
	PO Box 8053						
	Mason, OH 45040-8053 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	,					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	\square Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐Yes	Other. Specify					
		Revolving	account				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Mahmood, Asma	Case number (if know)			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Amex PO Box 297871	Line 4.1 of (Check one):			
Fort Lauderdale, FL 33329-7871	Part 2: Creditors with Nonpriority Unsecured Claims			
Tort Lauderdale, TE 33329-7071	Last 4 digits of account number 2173			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Amex	Line 4.2 of (Check one):			
PO Box 297871	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Fort Lauderdale, FL 33329-7871				
	Last 4 digits of account number 5823			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Bankamerica	Line 4.3 of (Check one):			
PO Box 982238	■ Part 2: Creditors with Nonpriority Unsecured Claims			
El Paso, TX 79998-2238	Last 4 digits of account number 9735			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Capital One	Line 4.6 of (Check one):			
15000 Capital One Dr	Part 2: Creditors with Nonpriority Unsecured Claims			
Richmond, VA 23238-1119	Part 2: Creditors with Nonphority Onsecured Claims			
	Last 4 digits of account number 2861			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Cbna	Line 4.9 of (Check one):			
50 NW Point Blvd	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Elk Grove Village, IL 60007-1032	Last 4 digits of account number 3652			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Chase Card PO Box 15298	Line 4.7 of (Check one):			
Wilmington, DE 19850-5298	■ Part 2: Creditors with Nonpriority Unsecured Claims			
g.co.i, 22 10000 0200	Last 4 digits of account number 8397			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Chase Card	Line 4.8 of (Check one):			
PO Box 15298	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Wilmington, DE 19850-5298	Last 4 digits of account number 2038			
	Last 4 digits of account number 2038			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Citi	Line 4.11 of (Check one):			
PO Box 6241 Sioux Falls, SD 57117-6241	■ Part 2: Creditors with Nonpriority Unsecured Claims			
51500X 1 0115, 55 57 117 5241	Last 4 digits of account number 2945			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Citi	Line 4.12 of (Check one):			
PO Box 6241	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Sioux Falls, SD 57117-6241	Last 4 digits of account number 4980			
Name and Address Comenity Bank/Avenue	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one):			
PO Box 182789				
Columbus, OH 43218-2789	■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number 1817			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Discover Bank	Line 4.15 of (Check one):			
502 E Market St	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Greenwood, DE 19950-9700	Last 4 digits of account number 1920			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			

Debtor 1 Mahmood, Asma	Case number (f know)				
Discover Fin Svcs LLC PO Box 15316	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims			
Wilmington, DE 19850-5316	Last 4 digits of account number	8058			
Name and Address Dsnb Macys PO Box 8218	On which entry in Part 1 or Part 2 di Line 4.37 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
Mason, OH 45040-8218	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 8854			
Name and Address Kohls/capone N56 W 17000 Ridgewood Dr	On which entry in Part 1 or Part 2 di Line 4.22 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
Menomonee Falls, WI 53051	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 5193			
Name and Address Syncb/jcp	On which entry in Part 1 or Part 2 di Line 4.30 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	_		
PO Box 965007 Orlando, FL 32896-5007	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 7230			
Name and Address					
Name and Address Syncb/lowes PO Box 965005	On which entry in Part 1 or Part 2 di Line 4.32 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Orlando, FL 32896-5005	Last 4 digits of account number	5697			
Name and Address Syncb/Old Navy PO Box 965005	On which entry in Part 1 or Part 2 di Line 4.31 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Orlando, FL 32896-5005	Last 4 digits of account number	2854			
Name and Address Syncb/tjx Cos Dc PO Box 965005	On which entry in Part 1 or Part 2 di Line 4.33 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Orlando, FL 32896-5005	Last 4 digits of account number	7962			
Name and Address Syncb/Walmart PO Box 965024	On which entry in Part 1 or Part 2 di Line <u>4.35</u> of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Orlando, FL 32896-5024	Last 4 digits of account number	4852			
Name and Address Syncb/Walmart DC PO Box 965024	On which entry in Part 1 or Part 2 di Line 4.34 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Orlando, FL 32896-5024	Last 4 digits of account number	3488			
Name and Address Td Bank N.A. 70 Gray Rd	On which entry in Part 1 or Part 2 di Line 4.36 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Portland, ME 04105-2019	Last 4 digits of account number	0927			
Name and Address Thd/Cbna	On which entry in Part 1 or Part 2 di	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 6497 Sioux Falls, SD 57117-6497	Line or (order one).	Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	3610			

Part 4: Add the Amounts for Each Type of Unsecured Claim

Case number (if know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	Ch	Toyon and partain other debte you are the government	6b.	•	
from Part 1	6b.	Taxes and certain other debts you owe the government	OD.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	63,275.58
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	63,275.58

Fill in this infor	ill in this information to identify your case:						
Debtor 1	Asma Mahmood						
	First Name	Middle Name	Last Name)			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK, BROOKLYN DIVIS	ION			
Case number (if known)					Charle if this is an		
(II KIIOWII)					☐ Check if this is an		
					amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	Name				
	Number	Street			_
0.0	City		State	ZIP Code	
2.3	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Case 1-17-44644-cec Doc 1 Filed 09/07/17 Entered 09/07/17 14:39:25

Fill in this i	nformation to identify your	rase:			
Debtor 1	Asma Mahmood	Jase .			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	a) First Name	Middle Name	Last Name		
		EASTERN DISTRICT O		I VNI DIVISIONI	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK, BROOK	LYN DIVISION	
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
Jonical	alc II. Tour God				12/13
are filing too and number	gether, both are equally resp	onsible for supplying co the left. Attach the Additi	rrect information. If mo	ore space is needed, c	e as possible. If two married people opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do y	ou have any codebtors? (If y	ou are filing a joint case, do	not list either spouse as	a codebtor.	
■ No □ Yes					
2. Withi	in the last 8 years, have you	lived in a community pro	perty state or territory	? (Community property	states and territories include Arizona,
Californ	iia, Idaho, Louisiana, Nevada,	New Mexico, Puerto Rico,	Texas, Washington, an	d Wisconsin.)	
■ No. (Go to line 3.				
☐ Yes.	Did your spouse, former spous	se, or legal equivalent live w	ith you at the time?		
line 2 a	gain as a codebtor only if th	at person is a guarantor	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn
106D), 9 Columr		106E/F), or Schedule G (0	Official Form 106G). Us	e Schedule D, Schedu	lle E/F, or Schedule G to fill out
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	ne
	ame			_ ☐ Schedule E/F,	
				☐ Schedule G, lir	
	lumber Street			_	
C	ity	State	ZIP Code		
3.2				☐ Schedule D, lin	ne.
	ame			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	lumber Street	State	ZIP Code	_	
C	шу	Sidle	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2017 CIN Group - www.cincompass.com Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to identify you	ur case:							
Del	btor 1 Asma Ma	ahmood							
	btor 2								
Uni	ited States Bankruptcy Court for	the: EASTERN DISTRICT DIVISION	OF NEW YORK, BI	ROOKLYN					
	se number nown)		-		□ A		. 3	postpetition o	:hapter 13
<u>O</u>	fficial Form 106l				M	M / DD/ Y	YYY		
S	chedule I: Your Ir	ncome							12/15
sup spo atta	as complete and accurate as p plying correct information. If y use. If you are separated and y ch a separate sheet to this for tt: Describe Employment	ou are married and not filin your spouse is not filing wit m. On the top of any additio	g jointly, and your h you, do not inclu	spouse is li de informati	ving with yo	ou, includ our spou	le informatise. If more	tion about your space is need	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
I	If you have more than one job,	Employment status	☐ Employed			☐ Employed			
	attach a separate page with information about additional employers.	Occupation	■ Not employed			☐ Not employed			
	Include part-time, seasonal, o self-employed work.	•							
	Occupation may include stude homemaker, if it applies.	ent or Employer's address							
		How long employed the	here?			_			
Pai	rt 2: Give Details About	Monthly Income							
	imate monthly income as of thess you are separated.	e date you file this form. If y	ou have nothing to re	port for any l	ine, write \$0	in the spa	ace. Include	your non-filir	g spouse
	ou or your non-filing spouse have ce, attach a separate sheet to this		bine the information f	or all employ	ers for that p	person on	the lines be	elow. If you ne	ed more
					For Deb	tor 1	For Deb	otor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly ov	vertime pay.		3. +	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

· · · ————————————————————————————————	or 1	Mahmood, Asma	_	Cas	e number (if know	n)			
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.00 \$ 5c. Nountary contributions for retirement plans 5c. S 0.00 \$ 5d. Required repayments of retirement fund loans 5d. S 0.00 \$ 5e. Insurance 5e. S 0.00 \$ 5f. Domestic support obligations 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Union dues 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlem	Co	ov line 4 here	4.			ne			
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.00 \$ 5d. Required repayments of retirement fund loans 5e. Insurance 5e. S 0.00 \$ 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 5m. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly income rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly income and dividends 8b. Iterest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include almony, spousal support, child support, maintenance, divorce settlement, and propenty settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8p. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8c+8c+8e+8f+8g+8h. 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.00 \$ 9. \$ 1,850.0		-		*-	0.0	<u> </u>		14/1	
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5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Tother deductions. Specify: 5h. Tother deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$0.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$1,850.00 \$ 8e. Social Security 8e. \$0.00 \$ 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$pecify: 8f. \$0.00 \$ 8g. Pension or retirement income 8g. \$0.00 \$ 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$1,850.00 \$ 9. Add all other income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.				· -				N/A	
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5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 5h. + \$ 0.00 \$ 5h				· -		<u> </u>		N/A	
5g. Union dues 5g. Sp. \$ 0.00 \$ 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,850.00 \$ \$ 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,850.00 \$ \$ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.				· -				N/A	
5h. Other deductions. Specify: 5h. + \$ 0.00 + \$ 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ 8e. \$ 0.00 \$ 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8f. \$ 0.00 \$ 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,850.00 \$ 10. \$ 1,850.00 \$ 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			_	· -				N/A	
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9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{1,850.00}{\$}\$\$ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify:	8g.	Pension or retirement income	— 8g.	. \$	0.0	<u>o</u> \$		N/A	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	8h.	Other monthly income. Specify:	8h.	+ \$	0.0	<u>0</u> + \$		N/A	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,850.0	o \$		N/A]
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Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11.		•	10.	Ψ	1,030.00	Ψ			1,030.00
	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not av	lepende		•			-\$	0.00
The that allocal of the carrier and the carrie							olies 12. \$		1,850.00
		No.	?					ombine onthly	ed income

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	Asma Mahmood			k if this is:	
	otor 2 ouse, if filing)			An amended filing A supplement show expenses as of the	ring postpetition chapter 13 following date:
	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YOUR BROOKLYN DIVISION	DRK,	-	MM / DD / YYYY	
	se numbernown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this fo known). Answer every question.				
Pai					
1.	Is this a joint case? ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses form	or Separate Househ	oldof Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		11	□ No ■ Yes
		Daughter		2mos	□ No ■ Yes
					□ No □ Yes
				-	□ No
_					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Est exp app	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a supple blicable date.	emental Schedule J			
val	lude expenses paid for with non-cash government assistance if y ue of such assistance and have included it on Schedule I: Your II ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$		1,350.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$;	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues	o oquity loons	4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hom	e equity loans	5. \$		0.00

Deb	tor 1	Mahmood, Asma	Case numb	per (if known)	
6.	Utilit	es:			
	6a.	Electricity, heat, natural gas	6a.	\$	250.00
	6b.	Water, sewer, garbage collection	6b.	\$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	and housekeeping supplies	 7.	\$	1,000.00
8.	Child	care and children's education costs	8.	\$	0.00
9.	Cloth	ing, laundry, and dry cleaning	9.	\$	250.00
10.	Pers	onal care products and services	10.	\$	50.00
11.	Medi	cal and dental expenses	11.	\$	200.00
12.		sportation. Include gas, maintenance, bus or train fare.	40		150.00
		ot include car payments.	12.		
		tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
		table contributions and religious donations	14.	\$	0.00
15.	Insu	ance. ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
		Health insurance	15b.		0.00
		Vehicle insurance	15c.	·	150.00
		Other insurance. Specify:	15d.	·	0.00
16		s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Spec	, , ,	16.	\$	0.00
17.		Car payments for Vehicle 1	17a.	\$	400.00
		Car payments for Vehicle 2	17b.		0.00
		Other. Specify:	17c.	·	0.00
		Other. Specify:	— 17d.	-	0.00
18.		payments of alimony, maintenance, and support that you did not report as	—	<u> </u>	
		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Othe	payments you make to support others who do not live with you.		\$	0.00
	Spec	·	19.		
20.		real property expenses not included in lines 4 or 5 of this form or on Sched			
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
0.4		Homeowner's association or condominium dues	20e.		0.00
21.	Othe	: Specify:	21.	+\$	0.00
22.	Calc	ılate your monthly expenses			
	22a.	Add lines 4 through 21.		\$	4,100.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	4,100.00
23.		late your monthly net income.	,		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,850.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,100.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-2,250.00
24.	For exmodifi	bu expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?	ı file this fo	orm?	·
	☐ Ye	s. Explain here:			

Fill in this	information to identify your	caso.			
		base.			
Debtor 1	Asma Mahmood First Name	Middle Name	Last Name		
Debtor 2	T HOL Flame	imade riame	<u> Laor Hamo</u>		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Star	tes Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK, BROOKLY	/N DIVISION	
Case numb	ber				
(if known)					☐ Check if this is an
					amended filing
If two marri You must f obtaining n	ied people are filing together ile this form whenever you fil noney or property by fraud ir oth. 18 U.S.C. §§ 152, 1341, 15	, both are equally respo le bankruptcy schedules n connection with a bank	onsible for supplying corre	ct information. Making a false statemer	
	Sign Below				
Did y	ou pay or agree to pay some	one who is NOT an attor	rney to help you fill out ba	nkruptcy forms?	
= 1	No				
	Yes. Name of person				ptcy Petition Preparer's Notice,
				Declaration, al	nd Signature (Official Form 119)
	penalty of perjury, I declare ney are true and correct.	that I have read the sum	nmary and schedules filed	with this declaration ar	nd
	/ A ama Malamaaal				
X/s	s/ Asma Mahmood		X		
A	sma Mahmood		X Signature of	Debtor 2	
A				Debtor 2	

EIII	in this inform	ation to identify your	2000			
			case:			
Det	otor 1	Asma Mahmood First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
				OF NEW YORK, BROOKLYN DIVISION		
UIII	ieu Siales Daii	kruptcy Court for the:	LASTERN DISTRICT O	IF NEW TORK, BROOKETH DIVISION		
	se number				□ Ch	eck if this is an
					_	ended filing
		m 106Sum		ad Cantain Statistical Information		
				nd Certain Statistical Information are filing together, both are equally responsible for	sunnlyir	12/15
info you	rmation. Fill or r original form	ut all of your schedule s, you must fill out a i	es first; then complete the	e information on this form. If you are filing amende the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						r assets e of what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$_	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	9,179.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	9,179.00
Par	t 2: Summa	rize Your Liabilities				·
					Vau	r liabilities
						unt you owe
2.			aims Secured by Property (nn AAmount of claim, at the	(Official Form 106D) e bottom of the last page of Part 1 of <i>Schedule D</i>	\$_	8,643.00
3.			Unsecured Claims (Official	Form 106E/F) s) from line 6e & chedule E/F	\$	0.00
					· -	
	3b. Copy the	total claims from Part	2 (nonpriority unsecured ci	laims) from line 6j of chedule E/F		140,319.58
				Your total liabilities	\$	148,962.58
Par	t 3: Summa	rize Your Income and	Expenses			
			•			
4.		our Income(Official Fombined monthly incom			\$_	1,850.00
5.		Your Expenses (Official onthly expenses from lin	,		\$_	4,100.00
Par	t 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	-	-	er Chapters 7, 11, or 13? on this part of the form. Che	eck this box and submit this form to the court with your	other sche	edules.
7.	Yes What kind of	f debt do you have?				
				lebts are those "incurred by an individual primarily for a cal purposes. 28 U.S.C§ 159.	personal,	family, or household
	☐ Your de	ebts are not primarily	consumer debts. You have	e nothing to report on this part of the form. Check this b	ox and su	ubmit this form to the

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

court with your other schedules.

Debtor 1 Mahmood, Asma Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,850.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Ell	l in this inform	ation to identify you	ır case:			
De	ebtor 1	Asma Mahmoo	Middle Name	Last Name		
1 -	ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name		
` `		nkruptcy Court for the		NEW YORK, BROOKLYN D	IVISION	
	illeu States Dan	ikrupicy Court for the	EASTERN DISTRICT OF	NEW TORK, BROOKETN D	TVISION	
	ase number				_	Check if this is an mended filing
Of	fficial For	m 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/1
info	ormation. If mo		ible. If two married people are , attach a separate sheet to th			
Pa	rt 1: Give D	etails About Your M	larital Status and Where You	Lived Before		
1.	What is your	current marital stat	us?			
	☐ Married					
	☐ Not marr	ried				
2.	During the la	st 3 years, have you	ı lived anywhere other than w	where you live now?		
	■ No □ Yes. List	all of the places you	lived in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Pri	or Address:	Dates Debtor 1 I	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat	tes and territorie	es include Arizona, Ca	ever live with a spouse or legalifornia, Idaho, Louisiana, Nev	ada, New Mexico, Puerto Rio		
Pa	rt 2 Explair	n the Sources of Yo	ur Income	,		
4.	Did you have Fill in the total If you are filing No	I amount of income y	mployment or from operating ou received from all jobs and a have income that you receive to	II businesses, including part-	time activities.	lar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
/ lanuary 1 to December 31 2016)		■ Wages, commissions, bonuses, tips	\$73,024.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business	
		year before that: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$51,715.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page

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Del	otor 1 M	ahmood, A	Asma		Ca	se number (if known)		
			Debtor			Debtor 2		
				s of income all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
5.	Include in other pub	come regard lic benefit pay	ess of whether that incoments; pensions; renta	ome is taxable. Exam I income; interest; di	previous calendar years? ples of other income are alinvidends; money collected from gether, list it only once under	n lawsuits; royalties;		
	List each	source and the	ne gross income from e	ach source separate	ly. Do not include income tha	t you listed in line 4.		
	■ No							
	_	. Fill in the de	etails					
			Debtor	1 s of income	Gross income from	Debtor 2 Sources of inc	omo	Gross income
			Describ		each source (before deductions and exclusions)	Describe below.		(before deductions and exclusions)
Pai	t 3: Lis	st Certain Pa	yments You Made Be	fore You Filed for	Bankruptcy			
6.	A 141	D 41	or Debtor 2's debts p		1-14-0			
	■ Yes.	* Subject * Subject Debtor 1 of During the No. Yes	Go to line 7. List below each credice creditor. Do not include payments to an attorn to adjustment on 4/01/1 To Debtor 2 or both ham 90 days before you filed Go to line 7. List below each credice payments for domest this bankruptcy case.	tor to whom you paid de payments for do ley for this bankrupto 9 and every 3 years ve primarily consu d for bankruptcy, did tor to whom you paid ic support obligations	after that for cases filed on or mer debts. you pay any creditor a total or a total of \$600 or more and to, such as child support and to.	one or more payment uch as child support after the date of additional fields of the second of the se	rt and alimony ljustment. paid that cred t include payn	y. Also, do not include ditor. Do not include ments to an attorney for
	Creditor	's Name and	l Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for
7.	Insiders in which you business No	nclude your re u are an office you operate a	elatives; any general par er, director, person in co	tners; relatives of an introl, or owner of 20	a payment on a debt you on y general partners; partnersh % or more of their voting sect e payments for domestic sup	ips of which you are urities; and any man	e a general par aging agent, i	rtner; corporations of including one for a
		S Name and		Dates of payme	ent Total amount	Amount you	Peason fo	r this payment
	insiders	s Name and	Address	Dates of payme	paid	Amount you still owe	Reason to	r this payment
8.	insider?	•	you filed for bankrup ebts guaranteed or cos	• •	nny payments or transfer a	ny property on acc	count of a de	ebt that benefited an
	■ No □ Yes.	. List all navm	ents to an insider					
		s Name and		Dates of payme	ent Total amount	Amount you still owe		r this payment

Del	otor 1	Mahmood, Asma		Case number (if known)	
Pai	rt 4:	Identify Legal Actions, Repossession	s, and Foreclosures			
9.	Withi List al	n 1 year before you filed for bankrupto Il such matters, including personal injury c ontract disputes.	y, were you a party in any			
	_	No Yes. Fill in the details.				
	Case	e title	Nature of the case	Court or agency	Status of the	e case
	Disc	cover Bank v. Asma Mahmood 003352/17	consumer debt	Civil Court, Richmond County	■ Pending □ On appe □ Conclude	
10.	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details below		ty repossessed, foreclosed, ç	garnished, attached, s	seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.				
	Cred	litor Name and Address	Describe the Property		Date	Value of the
			Explain what happened			property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		iding a bank or financial insti	tution, set off any am	ounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar No Yes		ty in the possession of an as	signee for the benefit	of creditors, a
Pai	rt 5:	List Certain Gifts and Contributions				
	Withi	n 2 years before you filed for bankrupt No Yes. Fill in the details for each gift.	cy, did you give any gifts	with a total value of more tha	an \$600 per person?	
	pers	s with a total value of more than \$600 p on on to Whom You Gave the Gift and	er Describe the gifts		Dates you gave the gifts	Value
		ress:				
14.		n 2 years before you filed for bankrupt No Yes. Fill in the details for each gift or contr		or contributions with a total v	value of more than \$6	00 to any charity?
	more Chai	s or contributions to charities that totale than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates you contributed	Value
-						

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 1-17-44644-cec Doc 1 Filed 09/07/17 Entered 09/07/17 14:39:25

Deb	otor 1 Mahmood, Asma		Case number (if known)						
	or gambling?								
	_								
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and	Descri	be any insurance coverage for the loss	3	Date of your	Value of property			
	how the loss occurred	Include	the amount that insurance has paid. List	pending	loss	lost			
		insurar	nce claims on line 33 of Schedule A/B: Pro	perty.					
Par	t 7: List Certain Payments or Transfers	5							
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition produced any attorneys.	oreparin	g a bankruptcy petition?			y to anyone you			
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	'ou	Description and value of any property transferred	у	Date payment or transfer was made	Amount of payment			
	Kevin B. Zazzera, Esq. 182 Rose Ave Ste 3 Staten Island, NY 10306-2900		legal fee			\$1,750.00			
	greenpath		credit counciling			\$50.00			
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that you have a limit of the second of the secon	litors or	to make payments to your creditors?	half pay or	transfer any propert	y to anyone who			
	Person Who Was Paid Address		Description and value of any property transferred	у	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already liste. No Yes. Fill in the details.	r busine made as	ess or financial affairs? security (such as the granting of a securit		•				
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset- ■ No □ Yes. Fill in the details.			settled trus	st or similar device of	which you are a			
	Name of trust		Description and value of the property	y transferre	ed	Date Transfer was made			

Official Form 107

Deb	otor 1	Mahmood, Asma				Cas	se numb	Der (if known)		
Par	t 8:	List of Certain Financial Accounts, Ins	strum	ents, Safe Deposit	Boxes, and Stor	age	Units			
20.	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No									
		Yes. Fill in the details.								
		ne of Financial Institution and Fess (Number, Street, City, State and ZIP)		Last 4 digits of Type of a count number instrumer		t clo mo		Date account was closed, sold, moved, or transferred		st balance before losing or transfer
21.		ou now have, or did you have within 1 y , or other valuables?	year b	pefore you filed for	bankruptcy, any	saf	fe depo	sit box or other deposi	tory f	or securities,
	■ No									
		Yes. Fill in the details.								
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S and ZIP Code)		Des	scribe t	he contents		Do you still have it?
22.	=	you stored property in a storage unit of No Yes. Fill in the details.	or pla	ce other than your	home within 1 ye	ear I	before ;	you filed for bankruptc	y?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)			Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Des	Describe the contents			Do you still have it?
Par	+ Q+	Identify Property You Hold or Control	for S	,						
23.	some	ou hold or control any property that so eone. No Yes. Fill in the details.	meon	ne else owns? Inclu	de any property	you	u borro	wed from, are storing fo	or, or	hold in trust for
	-	ner's Name ress (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		Des	scribe t	he property		Value
Par	t 10:	Give Details About Environmental Info	ormat	tion						
For t	the pu	urpose of Part 10, the following definition	ons ap	pply:						
	toxic	ronmental law means any federal, state substances, wastes, or material into the rolling the cleanup of these substances	ne air,	, land, soil, surface		• •		•		
	Site r	means any location, facility, or property operate, or utilize it, including disposa	y as d	lefined under any e	nvironmental lav	w, w	vhether	you now own, operate,	or ut	ilize it or used to
		rdous material means anything an env rial, pollutant, contaminant, or similar t		nental law defines a	s a hazardous w	aste	e, hazaı	rdous substance, toxic	subs	tance, hazardous
Rep	ort all	notices, releases, and proceedings that	at you	ı know about, regar	dless of when th	ney o	occurre	ed.		
24.	Has a	any governmental unit notified you tha	t you	may be liable or po	tentially liable u	nde	er or in v	violation of an environ	nenta	ıl law?
		No								
		Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)			Governmental unit Address (Number, Street, City, State and ZIP Code)			Environmental law, if you know it			Date of notice

Deb	ioi	wanmood, Asma		Cas	e number (if known)	
25.	Ha	ve you notified any governmental unit of	any release of hazardous material?			
		No				
	_	Yes. Fill in the details.				
		nme of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
20	Ues		,		noted level backeds softlements on	ad andona
20.	па	ve you been a party in any judicial or adn	ministrative proceeding under any enviro	JIIIIE	entai law? Include Settlements ar	ia oraers.
		No				
	Ц	Yes. Fill in the details.		•••		
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Part	t 11	Give Details About Your Business or 0	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrupt	cv. did vou own a business or have anv	of th	ne following connections to any	business?
		·	n a trade, profession, or other activity, e			
		_	any (LLC) or limited liability partnership		•	
		☐ A partner in a partnership	, , , , , , , , , , , , , , , , , , , ,	•	,	
		☐ An officer, director, or managing exe	ecutive of a cornoration			
		☐ An owner of at least 5% of the voting	•			
	_					
	_	No. None of the above applies. Go to P				
	П.	Yes. Check all that apply above and fill			Employer Identification number	-
	Ac	ısiness Name Idress	Describe the nature of the business		Employer Identification numbe Do not include Social Security	
	(Nı	ımber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	
		hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement to	any	one about your business? Includ	de all financial
		No				
		Yes. Fill in the details below.				
		ame Idress	Date Issued			
		umber, Street, City, State and ZIP Code)				
Part	t 12	Sign Below				
true bank	anc crup	ead the answers on this Statement of Final Correct. I understand that making a false of toy case can result in fines up to \$250,00 C. §§ 152, 1341, 1519, and 3571.	e statement, concealing property, or obt	tainir	ng money or property by fraud in	
		ma Mahmood	Signature of Debtor 2			
_		Mahmood ure of Debtor 1	Signature of Debtor 2			
Date	е _	August 30, 2017	Date			
Did y	/ou	attach additional pages to Your Statemen	nt of Financial Affairs for Individuals Fili	ing f	or Bankruptcy (Official Form 107)?
■ N						
□ Ye	es					
_ `		pay or agree to pay someone who is not	an attorney to help you fill out bankrup	tcy f	orms?	
■ N		Name of Person . Attach the <i>Bankrup</i>	otcy Petition Preparer's Notice Declaration	and	Signature (Official Form 119)	
			nent of Financial Affairs for Individuals Filing		, ,	page 6

Fill in this info	rmation to identify your case:		C	heck on	e hox only as di	rected in this form and	l in Form
Debtor 1	Asma Mahmood			22A-1St			
Debtor 2				■ 1 т	here is no presi	imption of abuse	
(Spouse, if filing)				_	·	•	
United States	Bankruptcy Court for the: Eastern District of Division	New York, Brook	dyn	á	applies will be m	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case number (if known)						does not apply now bed ut it could apply later.	cause of qualified
				☐ Ch	eck if this is a	n amended filing	
Official F	Form 122A - 1						
Chapter	7 Statement of Your Cur	rent Mon	ithly Inc	ome	9		12/15
a separate shee number (if know military service,	and accurate as possible. If two married people a to this form. Include the line number to which the wn). If you believe that you are exempted from a p complete and file Statement of Exemption from alculate Your Current Monthly Income	ne additional information of abu	mation applies use because yo	. On the ou do no	top of any additi	onal pages, write your l consumer debts or beca	name and case ause of qualifying
1. What is	your marital and filing status? Check one on	ly.					
■ Not m	narried. Fill out Column A, lines 2-11.						
☐ Marri	ed and your spouse is filing with you. Fill ou	it both Columns /	A and B, lines	2-11.			
☐ Marri	ed and your spouse is NOT filing with you.	You and your sp	oouse are:				
☐ Liv	ring in the same household and are not lega	Ily separated. Fi	ill out both Col	umns A	and B, lines 2-	11.	
ре	ring separately or are legally separated. Fill of enalty of perjury that you and your spouse are legart for reasons that do not include evading the N	gally separated un	nder nonbankru	ıptcy lav	v that applies or		
101(10A). Fo 6 months, ad	rerage monthly income that you received from all or example, if you are filing on September 15, the 6-mild the income for all 6 months and divide the total by e rental property, put the income from that property in	nonth period would l 6. Fill in the result.	be March 1 thro Do not include a	ugh Aug any incor	ust 31. If the amoune amoune the	unt of your monthly incom nan once. For example, it	ne varied during the
				Colur		Column B Debtor 2 or non-filing spouse	
•	oss wages, salary, tips, bonuses, overtime, a eductions).	and commission	ns (before all	\$	0.00	\$	
3. Alimony	and maintenance payments. Do not include B is filled in.	payments from a	spouse if	\$	1,850.00	\$	
of you o from an u roommat	unts from any source which are regularly par your dependents, including child support. unmarried partner, members of your household, tes. Include regular contributions from a spouse actude payments you listed on line 3	Include regular o	contributions	n. \$	0.00	\$	
5. Net inco	me from operating a business, profession,						
			tor 1				
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
,	and necessary operating expenses		Copy here -:	\$	0.00	\$	
	thly income from a business, profession, or far me from rental and other real property	m \$	oopy note .	Ψ <u> </u>		Ψ	
6. Net inco	me nom remai and other real property	Deb	otor 1				
Gross re	ceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
•	thly income from rental or other real property	\$ 0.00	Copy here -:	> \$	0.00	\$	
7. Interest.	dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit	under the					
	For you\$	(0.00					
	For your spouse \$							
9.	Pension or retirement income. Do not include any amounder the Social Security Act.	unt received that was	a benefit	\$	0.00	\$		
10.	Income from all other sources not listed above. Specinot include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or interior in necessary, list other sources on a separate page and put	y Act or payments re- national or domestic t	ceived as	\$	0.00	\$		
	·			φ		Ψ		
				3	0.00	Ф		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	1,850.00	+ [\$		=\$_	1,850.00
					, L			current monthly
Part	2: Determine Whether the Means Test Applies to	You					incom	e
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	ere=>	\$	1,850.00
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	orm				12b.	\$	22,200.00
13.	Calculate the median family income that applies to y	ou. Follow these step	os:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size of the find a list of applicable median income amounts, go of form. This list may also be available at the bankruptcy of	online using the link		n the separat	e instructi	13. ons for this	\$	75,870.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, c	check box	1T,here is no p	presumptio	on of abuse.		
	14b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box	2Ţhe presi	umption of ab	use is dete	ermined by Fo	rm 122A	-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury th	at the information on	this stater	nent and in ar	ny attachm	nents is true an	d correc	t.
	X /s/ Asma Mahmood				,			
	Asma Mahmood Signature of Debtor 1							
	Date August 30, 2017							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fil	e it with this form.						

Mahmood, Asma

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$245	5	filing fee	
\$75	5	administrative fee	
+ \$15	5_	trustee surcharge	
\$335	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1-17-44644-cec Doc 1 Filed 09/07/17 Entered 09/07/17 14:39:25

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

In re	Mahmood, Asma	,	Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	ORNEY FOR I	DEBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptc	y, or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	1,750.00	
	Prior to the filing of this statement I have received		\$	1,750.00	
	Balance Due		\$	0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed comp firm.	pensation with any other perso	n unless they are me	mbers and associates	of my law
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	cts of the bankruptcy	case, including:	
t c	Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of creditor. [Other provisions as needed]	ement of affairs and plan which	ch may be required;	•	kruptcy;
6. I	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	or payment to me for	representation of the	debtor(s) in
Α	ugust 30, 2017	/s/ Kevin Zazzera	1		
Date		Kevin Zazzera Signature of Attorn Kevin B. Zazzera			
		182 Rose Ave St Staten Island, N			
		kzazz007@yaho	o.com		
		Name of law firm			